



The form must be complete of the requested data and sent to entry@marcialonga.it or fax +39 0462 501120 with the payment of 10,00 € that can be done with:

- Bank transfer on IBAN IT27S0818435280000000083816 / BIC CCRTIT2T50A
Bank: Cassa Rurale di Fiemme

NAME _____

SURNAME _____

DATE OF BIRTH _____

ADDRESS (street, zip code, city) _____

EMAIL (parent) _____

PHONE (parent) _____

SIGNATURE OF PARENT _____